## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE PATENT APPLICATION TRANSMITTAL LETTER



Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing pursuant to 37 C.F.R. 1.53 is the patent application of:

## **INVENTORS:**

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## FOR: IONTOPHORESIS SYSTEM

| Enclosed are: |   |  |  |  |  |  |
|---------------|---|--|--|--|--|--|
| _X_           | (3) three sheets of drawings.   |  |  |  |  |  |
| <u>X</u>      | An Assignment of the invention to: Hisamitsu Pharmaceutical Co., Inc. |  |  |  |  |  |
| <u>X</u>      | An associate power of attorney.                                       |  |  |  |  |  |
|               | A Notice of Informal Filing of New Patent Application.                |  |  |  |  |  |

The filing fee is calculated as follows:

|              |            |           |                 |    | ·                            |
|--------------|------------|-----------|-----------------|----|------------------------------|
|              | CLAIMS AS  | FILED     | SMALL<br>ENTITY |    | OTHER THAN A<br>SMALL ENTITY |
| FOR          | NO. FILED  | NO. EXTRA | RATE FEE        |    | RATE FEE                     |
| BASIC FEE    |            |           | \$385           |    | \$ 770                       |
| Total Claims | 9 -20=     | -0-       | x9=             | or | x18= -0-                     |
| Indep claims | 3 -3=      | -0-       | X43= -0-        | or | x 88 = -0-                   |
| [] Multiple  | Dep claims | -0-       | +145= -0-       | or | +290= -0-                    |
|              |            |           | TOTAL           |    | TOTAL \$ 770                 |
|              |            |           |                 |    |                              |

| <u>X</u>    | Check in the amount of \$ 770.00 (for the initial filing fee) is enclosed.  |  |  |  |  |
|-------------|---|--|--|--|--|
|             | The Commissioner is hereby authorized to charge \$ to Deposit Account No. 20-1424 for the filing fee listed above.  |  |  |  |  |
| <del></del> | The Commissioner is hereby authorized to charge \$\ to the credit card identified in the attached Credit Card Payment Form for the filing fee listed above.   |  |  |  |  |
| X           | The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 20-1424. A duplicate copy of this sheet is attached. Any additional fees under 37 CFR 1.16 for the presentation of extra claims Any patent application processing fees under 37 CFR 1.17. |  |  |  |  |
| X           | The Commissioner is hereby authorized to charge payment of the following fees during the pendency of this application or credit any overpayment to Deposit Account No. 20-1424. A duplicate copy of this sheet is attached. Any patent application processing fees under 37 CFR 1.17, including extension of time fees.                                     |  |  |  |  |
|             | x Any filing fees under 37 CFR 1.16 for the presentation of extra claims.   |  |  |  |  |

Respectfully submitted,

Donald E. Townsend

Reg. No. 22,069

Date: December 5, 2003

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